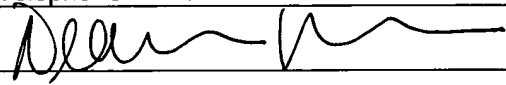
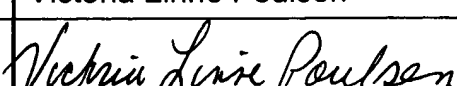
 <b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application No.	<b>08/977644</b>
	Filing Date	<b>November 24, 1997</b>
	First Named Inventor	<b>Emerson</b>
	Examiner Name	<b>N. Levy</b>
	Group Art Unit	<b>1616</b>
Total Number of Pages in This Submission	<b>11</b>	Attorney Docket No. <b>RE-70631 (469201-109)</b>

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Check for \$55.00 for Pet for One Month Extension of Time (Small Entity)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, No. of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	<b>DORSEY &amp; WHITNEY LLP</b> 4 Embarcadero Center, Suite 3400 San Francisco, CA 94111 Telephone: 415 781 1989	<b>Customer Number 32940</b>
Signature		
Date	<b>August 19, 2004</b>	

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with Sufficient postage as U.S. Express Mail <b>EV 529550847</b> in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:			<b>8/19/04</b>
Typed or printed name	<b>Victoria Linne Poulsen</b>		
Signature		Date	<b>August 19, 2004</b>